

values of respect for oneself and for others. Based on feedback from the provider survey, incentives facilitated conversations between client and provider and were a valuable resource in increasing awareness about the availability of services and the importance of having a RLP.

In addition, on the Systems of Care level, NPI provided the opportunity for incentives beyond individual items. Project funds supported each HD's selection of an improvement to make their clinics more family friendly. Some painted waiting rooms in colors inviting to men as well as women and children. Others purchased DVD players to show health promotion videos appropriate for their clientele. Others created a health information corner, furnished appropriately. As a result, HD providers strengthened their ties to the project and were more engaged in targeting the project's message to the population they know so well. Incentives at both the individual participant level *and* agency levels were important components of project success.

Based on feedback from 165 self-assessments completed by community outreach workers from 58 churches, 18 CBOs, and six local HDs who received NPI training, 95% rated their increase in knowledge as "high", and demonstrated new knowledge of existing services in their communities supporting RLP, preconception/ interconception health and child health promotion in the first year of life. Over 160 clinical providers (pediatricians, primary care providers, obstetrician/gynecologists, nutritionists, nurses, office champions, social workers, health educators) across the six-county project Region who received NPI trainings and filled out self-assessments also reported on increased knowledge. The majority (82%) increased their knowledge of existing services in their communities that support RLP, preconception/inter-conception and child health